



Appl. No. 09/699,757

152 (10.0)  
Buell

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Matsushita et al.  
Appl. No.: 09/699,757  
Filed: October 30, 2000  
Conf. No.: 6866  
Title: GRAPHIC PROCESSING APPARATUS  
Art Unit: 2672  
Examiner: M. Good Johnson  
Docket No.: 112857-076

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FEB 18 2004

Technology Center 2600

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT UNDER 36 C.F.R. §116


Sir:

Please amend the above-identified patent application in response to the Final Office Action issued on December 8, 2003 as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 6 of this paper.

AF

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>112857-00076</b>	
Applicant(s):					
Serial No. <b>09/699,757</b>	Filing Date <b>October 30, 2000</b>	Examiner <b>Mr. Good Johnson</b>		Group Art Unit <b>2672</b>	
Invention: <b>GRAPHIC PROCESSING APPARATUS</b>					
<u>TO THE COMMISSIONER FOR PATENTS:</u>				<b>RECEIVED</b>  <b>FEB 18 2004</b> <b>Technology Center 2600</b>	
<p>Transmitted herewith is an amendment in the above-identified application.</p> <p>The fee has been calculated and is transmitted as shown below.</p>					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	6 -	6 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<div style="display: flex; justify-content: space-between;"><div><p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p><p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p><p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p><p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>02-1818</b></p><p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p><p><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p></div><div style="text-align: right; width: 30%;"><p>Dated: <b>February 9, 2004</b></p></div></div> <div style="margin-top: 20px;"><div style="display: flex; align-items: center;"><div style="text-align: center; width: 30%;"> Signature</div><div style="width: 70%;"></div></div><div style="margin-top: 10px;"><b>Peter Zura</b> Reg. No. 48,196 P.O. Box 1135 Chicago, Illinois 60690-1135 (312) 807-4708</div></div>					
<div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and fee is being deposited on <b>February 9, 2004</b> with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div><p style="text-align: center; margin-top: 5px;"><i>Signature of Person Mailing Correspondence</i></p><div style="border-top: 1px solid black; height: 20px; margin-top: 5px;"></div><p style="text-align: center; margin-top: 5px;"><b>Renee Street</b></p><p style="text-align: center; margin-top: 5px;"><i>Typed or Printed Name of Person Mailing Correspondence</i></p></div>					
CC:					